

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/736,306		
	Filing Date	December 15, 2003	
	First Named Inventor	Mohsen Shirazi	
	Art Unit	Unknown	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	10	Attorney Docket Number	3568.1

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Notice to File Corrected Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return Postcard
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Remarks

The Commissioner is hereby authorized to charge any additional fees which may be required to Deposit Account 01-0431.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Wei Zhou, Reg. No. 44,419
Signature	
Date	June 8, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Priyadarshini Rath		
Signature		Date	June 8, 2004

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Serial No.: 10/736,306
Attorney Docket No.: 3568.1

PATENT
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Shirazi et al.

Examiner: Unknown

Serial No: 10/736,306

Group Art Unit: Unknown

Filing Date: December 15, 2003

Inventors: Shirazi et al.

**Title: Automated high-throughput
microarray system**

Commissioner for Patents
P.O. Box 14501
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Prior to examination of the above-referenced application, please amend the
subject application as follows:

Please add Drawing Figures 13-19 to the subject application

Remarks begin on page 2 of this paper.

An **Appendix** including the seven sheets of drawing figures is attached following page 2
of this paper.